



156/8700

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|  |   |                      |                  |
|--|---|----------------------|------------------|
| Total Number of Pages in This Submission | 3 | Application No.      | 09/245,292       |
|  |   | Filing Date          | February 5, 1999 |
|  |   | First Named Inventor | Jay J. Salkini   |
|  |   | Examiner Name        | C. Lee           |
|  |   | Group Art Unit       | 2663             |
|  |   | Attorney Docket No.  | 5195             |

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FEB 21 2003

## ENCLOSURES (check all that apply)

Technology Center 2600

|  |   |  |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Assignment Papers (for an Application)                         | <input type="checkbox"/> After Allowance Communication to Group                                |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Drawing(s)   | <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Reply                                   | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)     |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition   | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Status Letter   |
| <input checked="" type="checkbox"/> Extension of Time Request                | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below):                           |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Terminal Disclaimer  |  |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> Request for Refund   |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> CD, No. of CD(s) _____   |  |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application   | Remarks   |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                         |                                 |
|-------------------------|---------------------------------|
| Firm or Individual name | John K. Harrop, Reg. No. 41,817 |
| Signature               | <i>John K. Harrop</i>           |
| Date                    | February 14, 2003               |

## CERTIFICATE OF MAILING

|   |  |      |  |
|---|--|------|--|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with Sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, Washington, DC 20231 on this date: |  |      |  |
| Typed or printed name   |  |      |  |
| Signature   |  | Date |  |